

Middle East Respiratory Syndrome Coronavirus (MERS-CoV) update, May 28, 2014

The MERS situation in the U.S. represents a **very low risk to the general public in this country.**

Background, MERS and MERS-CoV

- Middle East Respiratory Syndrome (MERS) is the illness caused by Middle East Respiratory Syndrome Coronavirus (MERS-CoV).
- We don't know where the virus came from or exactly how it spreads. Scientists are investigating clusters of MERS in countries in and near the Arabian Peninsula to learn how the initially infected people (index cases) were exposed to the virus.
- Studies have been done to test animals, including camels, for evidence of MERS-CoV infection. One recent study showed that MERS-CoV gene sequences detected in samples from camels in Saudi Arabia were similar to MERS-CoV gene sequences detected in samples from infected humans.
- Camel infections may play a role in human infection with MERS-CoV, but more research is necessary

Symptoms

- Most people confirmed to have MERS-CoV infection have had severe acute respiratory illness. Symptoms included fever, cough, and shortness of breath. Many of them had pneumonia. Some people also had gastrointestinal symptoms, including diarrhea. Some have had kidney failure. About 30% of them died.
- Some people did not have any symptoms, or had only mild respiratory illness; they recovered.

Risks

- Based on the information we have so far, people with pre-existing health conditions (comorbidities) or weakened immune systems may be more likely to become infected with, or have a severe case of, MERS. Most of the people who died from MERS had at least one comorbidity.

Transmission

- In other countries affected by MERS:
 - Limited human-to-human spread has been reported, usually after close and prolonged contact, such as caring for or living with an infected person.
 - There is no definitive evidence of sustained spreading in community settings. Infected people have spread MERS-CoV to others

in healthcare settings. This has happened in hospitals in Saudi Arabia, France, Jordan, UAE, and Qatar.

What the general public should do to protect themselves

- CDC routinely advises that people help protect themselves from respiratory illnesses by taking everyday preventive actions like washing their hands often; avoiding touching their face with unwashed hands; avoiding close contact with people who appear sick; and cleaning frequently touched surfaces.

What people preparing to travel should do

- At this time, CDC does not recommend that anyone change their travel plans.
- If you are traveling to countries in or near the Arabian Peninsula, CDC recommends that you pay attention to your health during and after your trip.
- CDC recommends that travelers stay informed by visiting www.cdc.gov/travel and following @CDCtravel for updates and the latest advice. The travel notice for MERS-CoV was upgraded to a level 2 alert.
- For more information, see WHO's recommendations on page 8 at: http://www.who.int/csr/disease/coronavirus_infections/MERS_CoV_Update_09_May_2014.pdf%20

MERS Cases and Deaths Worldwide (WHO)

- As of May 23, 2014, a total of 632 laboratory-confirmed cases, including 193 deaths due to MERS-CoV infection have been reported. Reported illness onsets were between April 2012 and May 2014. Since mid-March 2014, the frequency with which cases have been reported has increased. The frequency with which travel-associated cases have been reported, and the number of countries reporting them, have also increased. Public health investigations are ongoing to determine the reason for the increase in cases.

Prepared by the Madison Health Department, Madison, NJ
All information is directly from the **CDC/MERS website**